

Exhibit 120
PRODUCER REQUIREMENTS FOR eDAS
 Format/Edits

No.	Tag	Key	Level of Change	IN/OUT	REQ/OPT/CON	Max Size	Picture	Description/Edit
1	<DATA_IDENTIFIER>		NA	Y/Y	REQ	20	X(20)	Data Identifier = 'PRODUCER'. Producer information for the policy number.
2	<INSURANCE_PROVIDER>	Y	3	Y/Y	REQ	2	X(02)	Edit with Insurance Provider/Company table.
3	<LOCATION_STATE>	Y	3	Y/Y	REQ	2	9(02)	Edit with FIPS State table.
4	<COMPANY>	Y	3	Y/Y	REQ	3	9(03)	Policy Issuing company, edit with company table.
5	<POLICY_NUMBER>	Y	3	Y/Y	REQ	7	9(07)	Must be > zeros.
6	<CROP_YEAR>		NA	N/Y	REQ	4	9(04)	Must = Reinsurance Year.
7	<INSURANCE_PLAN_CD>	Y	NA	Y/Y	REQ	2	9(02)	Insurance Plan Code, edit with ADM 2. Only valid plans are '81' and '82'.
8	<ID_TYPE>		2	Y/Y	REQ	1	9(01)	Must be one of the following: 1 = SSN, 2 = EIN, 5 = BIA Number. (See Exhibit 120-1 for valid combinations)
9	<ID_NUMBER>		2	Y/Y	REQ	9	X(09)	If ID Type equals: '1' then Social Security Number, '2' then EIN Number (Numeric, > zero), '5' then Bureau of Indian Affairs No. (first 5 digits are FIPS State and County code). (See Exhibit 120-1 for valid combinations). Edit to SSA file and ITS database. Edit for duplicate coverage. Must be 9 digits.

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10	<ENTITY_TYPE>		2	Y/Y	REQ	1	X(01)	Must be one of the following: B = Bureau of Indian Affairs C = Corporation D = Estates E = Religious, Charitable, Educational, Associations, Clubs, or Other Tax-Exempt Organizations G = Public Entities, State or Local Government I = Individual J = Co-Owner/Joint Operators N=Enterprise O = Other (Non-US Citizens) P = Partnership S = Spousal Husband/Wife T = Trusts (See Exhibit 120-1 for valid combinations)
11	<LAST_NAME>		1	Y/Y	CON	20	X(20)	Producer Last Name, see Exhibit 120-1 for Reporting Requirements. If Name Required column is 'F/L', Producer Last Name is required. If 'FLB', Producer Last Name is required if Business name is blank. If 'BUS' leave Producer Last Name blank. Any entry requires a minimum of 2 characters, alpha only (except – space, period, dash).
12	<FIRST_NAME>		1	Y/Y	CON	10	X(10)	Producer First Name, see Exhibit 120-1 for Reporting Requirements. If Name Required column is 'F/L', Producer First Name is required. If 'FLB', Producer First Name is required if Business name is blank. If 'BUS' leave Producer First Name blank. Alpha only (except – space, period, dash).
13	<MIDDLE_NAME>		1	Y/Y	OPT	10	X(10)	Producer Middle Name. Alpha only (except – space, period, dash).
14	<SUFFIX>		1	Y/Y	OPT	5	X(05)	Producer Name Suffix (e.g. SR, JR, II, etc.). Alpha only (except – space, period, dash).

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No.	Tag	Key	Level of Change	IN/OUT	REQ/OPT/CON	Max Size	Picture	Description/Edit
15	<TITLE>		1	Y/Y	OPT	4	X(04)	Producer Title (e.g. DR, etc.). Alpha only (except – space, period, dash).
16	<BUSINESS_NAME>		1	Y/Y	CON	35	X(35)	Business Name. See Exhibit 120-1 for Reporting Requirements.
17	<ADDRESS_LINE_1>		1	Y/Y	REQ	35	X(35)	Address Line 1.
18	<ADDRESS_LINE_2>		1	Y/Y	OPT	35	X(35)	Address Line 2.
19	<CITY>		1	Y/Y	REQ	35	X(35)	If State code = ‘ZZ’ enter foreign city and country.
20	<ADDRESS_STATE>		1	Y/Y	REQ	2	X(02)	Enter Alpha state abbreviation. Edit with FIPS State Table. If a foreign country, enter ‘ZZ’.
21	<ADDRESS_COUNTY>		1	Y/Y	REQ	3	9(03)	Edit with county table. Must be valid for zip code submitted.
22	<ZIP_CODE>		1	Y/Y	REQ	5	X(05)	If State NE ‘ZZ’ must be a valid US zip code. Edit with lookup table for current address state and county.
23	<ZIP_EXTENSION>		1	Y/Y	OPT	4	X(04)	Must be numeric.
24	<PHONE_NUMBER>		1	Y/Y	REQ	10	X(10)	Must be numeric and greater than zero. If a producer does not have a phone number submit all 5’s.
25	<EMPLOYEE>		2	Y/Y	REQ	1	X(01)	Must be one of the following: A = Agent or Adjuster C = Company Employee E = RMA Employee N = None of the Above R = Relative of Company Employee
26	<INS_SIGN_DT>		2	Y/Y	REQ	10	X(10)	Insured Signature Date of Application for the insurance plan. Cannot be greater than current date. Format MM/DD/YYYY. Numeric with slashes.
27	<AGENT_SSN>		1	Y/Y	REQ	9	X(09)	Enter the SSN of the agent responsible for this policy number. Must have an accepted active agent on database. Must be 9 digits.

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No.	Tag	Key	Level of Change	IN/OUT	REQ/OPT/CON	Max Size	Picture	Description/Edit
28	<AGENT_SIGN_DT>		2	Y/Y	REQ	10	X(10)	Agent Signature Date of Application for the insurance plan. Cannot be greater than current date. Format MM/DD/YYYY. Numeric with slashes.
29	<DETAIL_NUM>		1	Y/Y	REQ	3	9(03)	Agent Detail Number from the AGENT data identifier for the agent that is responsible for this producer.
30	<CHANGE_FLAG>		1	Y/Y	CON	1	X(01)	If Process Flag = 2 or 5 certain data will be allowed to change after initial acceptance. Tags have been identified by flags below. Flag of '1' will only be allowed to change data identified by '1'. Flag of '2' will be allowed to change data identified by '1 or 2'. Flag of '3' will be allowed to change any data.
31	<PROCESS_FLAG>		1	Y/Y	REQ	1	X(01)	Valid flags: 1 = general 2 = company approval 3 = RMA approval
32	<AUTHORIZATION_NUM>		3	Y/Y	CON	5	9(05)	Valid flags: 1 = original 2 = modify 3 = delete 4 = validate (original) 5 = validate (modify) 6 = quote (not applicable for producer) 7 = retrieve 8 = cancel 9 = delete of producer (& SBI, if applicable) if no premium
33	<FCIC_DT_TM>		NA	N/Y	REQ	19	X(19)	Authorization Number provided by Reinsurance Services Division (RSD) approving the change or deletion of premium. Change Flag (field 30) must = 3 and Process Flag (field 31) must = 2, 3, 5 or 9. FCIC Control Date and Time of process, format YYYY-MM-DD HH-MM:SS. There is a space between the DD and HH.

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No.	Tag	Key	Level of Change	IN/OUT	REQ/OPT/CON	Max Size	Picture	Description/Edit
34	<REINSURANCE_YEAR>	Y	NA	Y/Y	REQ	4	9(04)	The Reinsurance Year. Format YYYY.
35	<TRANS_SEQUENCE_NUM>		NA	N/Y	REQ	8	9(08)	Transaction Sequential Number assigned to each transaction number processed by eDAS.
36	<TRANS_RECORD_NUM>		NA	N/Y	REQ	3	9(03)	Transaction Record Number
37	<TRANSACTION_FLAG>		NA	N/Y	REQ	1	X(01)	If transaction accepted, flag = Y. If rejected, flag = N. If deleted, flag = D. If cancel, flag = C. When data is moved to history (RMA), flag =H.

Notes: Key fields are: Insurance Provider (field 2), Reinsurance Year (field 34), Location State (field 3), Company (field 4), Policy Number (field 5), Insurance Plan Code (field 7)

Key fields with Level of Change = 3 will be allowed with RMA approval. When company submits this information, eDAS will change all other associated data identifiers to the new information.

Information regarding column headers:

- 1) 'Tag' identifies the naming convention used in creation of XML.
- 2) 'Key' identifies the tags that are key to the validation/storage of data.
- 3) 'Level of Change' identifies the data that's allowed to change and at what level according to Change Flag.
- 4) 'IN/OUT' identifies the direction of data, IN for input and OUT for output with flags 'N' (NO) and 'Y' (YES).
- 5) 'REQ/OPT/CON' identifies if the data is required (REQ), optional (OPT), or conditional (CON), if optional or conditional and there's no data to report the tag is not used.
- 6) 'Max Size' is the maximum size of data allowed for that tag.
- 7) 'Picture' identifies the type of data expected.
- 8) 'Description/Edit' gives additional information.